

Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

Philhealth Regional Office VI, Majestic Bldg. #15 J. De Leon St., Iloilo City Tel Nos. 3378724 / 5087300 region6@philhealth.gov.ph

PHILIEALTH REGIONA MSD FMS-COMI-TRO	L OFFICE VI
RECEIVED	I RELEASED
# 5 139 -ON 5/80 5/84	6 "MATE
9:9/M 250pm apm	6/1

PURCHASE ORDER

Supplier: HOTEL DEL RIO

P.O. No:

61205-123

Address: MH del Pilar St., Molo

Date:

May 25, 2012

Ilollo City Tel./Fax: 335-1171 to 74 Terms of Payment: Mode of Procurement

30 calendar days **Negotiated Procurement**

Supplier Registered with:

RIV No.:

207-03-12

Please deliver to this Office on April 23, 2012 upon receipt hereof:

ON	QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	TOTAL AMOUNT
	8	рах	DINNER	300.00	2,400.
			Type: Buffet		
			Menu:		
			Soup - One kind	Mushroom Soup	
			Side Dish - One kind (vegetables)	Chopsuey	
			Main Dishes - One Kind (Pork/Beef) &	Beef Rolade	
			One Kind (Fish)	Fish Casserole	
			Dessert - One Kind	Upside down cake	
			Rice		
			Drinks		
			Inclusive:		
			Venue, Electricity for IT equipments,		
			sound system, podium, rostrum,		
			backdrop & set up.		
			NOTE: ADDITIONAL TO P.O.#61203-062		
			Dated: March 27, 2012		
			For the participants on the forum for Updating		
			of Accredited Health Care Professionals in		
			Region 6 PhRO VI - on April 23, 2012		
				TOTAL	2,400.0

Conditions:

*The Agency shall impose a penalty in the amount equivalent to 1/10 of 1 percent of the value of undelivered order for each day of the delay as liquidated damages.

*Render your bills in triplicate copies including the original.

*If the date of receipt of this P.O. by the dealer is not indicated, it shall be deemed received on the 10th working day from the date of the approval.

*For imported items, IMPORTANT DOCUMENTS specifically showing the condition, serial numbers of the equivalent purchased, and tax receipts should be submitted by the supplier.

Very truly yours

CHIEF, MSD

Fund available in the amount of :

JONALYN T. ILISAN/JEIJEN ROSE CHULG

Fiscal Controller III/Fiscal Conroller IV

Approved:

767-00 Received copy

CONFORME:

(Printed Name & Signature of Supplier/Rep.)